Approved for use through 10/31/2002 OMB 065-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Attorney Docket Number DECLARATION FOR UTILITY OR DESIGN PTO/SB/01 (10-01) Approved for use through 10/31/2002 OMB 065-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Attorney Docket Number 501014.20011 First Named Inventor J. Douglas Fletcher								
DEGLARATION FOR HELLINGS	Attorney Docket Nu	mber 501014.20011						
DECLARATION FOR UTILITY OR DESIGN	First Named Invento	J. Douglas Fletcher						
PATENT APPLICATION	COMPLETE IF KNOWN							
(37 CFR 1.63)	Application Number	10 / 810,216						
Declaration Declaration	Filing Date	March 26, 2004						
Submitted OR Submitted after Initial with Initial Filing (surcharge	Art Unit	1756						
Filing (37 CFR 1.16 (e)) required)	Examiner Name	Unknown						

As the below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.							
I believe I am the original and first inv	I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
METHOD, APPARATUS AN	D MEDIA FOR DISPL	AYING INFORMATIO	N				
	(Title of the I	nvention)					
the specification of which							
is attached hereto							
OR CONTRACTOR OF THE PROPERTY							
was filed on (MM/DD/YYYY)	03/26/2004	as United States A	pplication Number	or PCT International			
L							
Application Number 10/810,216	and was amend	ed on (MM/DDXXXX)	· · · · · · · · · · · · · · · · · · ·	(if applicable)			
7 4 70 70 70 72 70	Application Number 10/810,216 and was amended on (MM/DD/YYYY) (if applicable).						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part							
applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United							
States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy Attached?			
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES NO			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, VA 22313-1450

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Nur or Bar Code L				respondence address below				
Eugene LeDonne, Esq.								
Reed Smith, LLP Address 599 Lexington Avenue								
City New York						zIP 10022-7650		
United States	Telep	Felephone (212) 521-5400			Fax (212) 521-5450			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR :	NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor							
Given Name Family Name Fletcher or Surname Given Name Family Name Fletcher Or Surname Control of S								
Inventor's Signature Date 7/14/2004						Date 7/14/204		
Residence: City		TN State	<u></u>	Coun	try U.	S.A.		U.S.A. Citizenship
6347 Falcon Ridge Cove Mailing Address								
Bartlett City		TN State		3 ZIP	8135			U.S.A. Country
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any]) Kangning or Surname								
Inventor's Signature Date 7/10/2015					Date 7/20/2004			
Bartlett Residence: City		TN State		Coun		.S.A.		U.S.A. Citizenship
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Bartlett City		TN State		ZIP 3	8135	5		U.S.A. Country
Additional inventors are being named on the _1_supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								

PTO/SB/02A (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor				
Given Mark Anthony			Family Name Darty				
Inventor's Mark author lat					Date 7/14/04		
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Mailing Address							
_{City} Collierville	State TN	N Z	ZIP 38017	Count	ntry U.S.A.		
Name of Additional Joint Inventor, if any:							
Given Family Name or Surname							
Inventor's Signature Date							
Residence: City	State	c	Country		Citizenship		
Malling Address							
Mailing Address							
City	State		ZIP	Countr	itry		
Name of Additional Joint Inventor, if any:							
Given Family Name Name or Surname							
Inventor's Signature Date							
Residence: City	State		Country		Citizenship		
Mailing Address							
Mailing Address							
City	State		ZIP	Co	ountry		

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